

TITLE: Treatment of vascular dementia: a
comprehensive review
AUTHOR(S): Lee, Jae-Hong
CORPORATE SOURCE: Department of Neurology, Asan Medical Center,
University of Ulsan College of Medicine, Seoul, S.
Korea
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AB A review. Vascular dementia is the second most common cause of dementia in the elderly after Alzheimer's disease. At present, there are only very limited data that might support either the prevention or the treatment of vascular dementia, despite a long history of attempts. Heterogeneity of vascular dementia complicated the study of treatment and its diagnostic paradigm based on Alzheimer's disease made it impossible to identify cases early enough to prevent the development of dementia. A new concept, vascular cognitive impairment, has been proposed to underscore the importance of early identification and treatment of vascular dementia. Prevention involves the control of putative vascular risk factors (i.e. hypertension, diabetes, cardiac arrhythmias, smoking, hyperlipidemia) and the promotion of potential protective factors. Primary and secondary prevention of stroke and cardiovascular disease decreases the burden of vascular dementia. Targets for the treatment of vascular dementia include (1) improvement of core symptoms (cognition, executive function, and behavior), (2) improvement of secondary factors affecting cognition (depression, anxiety, agitation), (3) slowing the progression of vascular dementia. Cholinesterase inhibitors used for Alzheimer's disease are also useful in vascular dementia, awaiting to be accepted as the first-line treatment for vascular dementia.